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EPILEPSY IN CONTEXT OF ACQUIRED BRAIN INJURY (ABI) IN A TERTIARY NEUROPSYCHIATRIC SETTING

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Introduction: Each year around 1/10,000 of general population sustain a traumatic brain injury (7,000 individual in UK) and as a result have an increased risk of epilepsy in the long term.

To the best of our knowledge there is not much literature available on incidence and prevalence of epilepsy following ABI in the group of patients who develop psychiatric presentation as a result.

Aims: To ascertain the prevalence of epilepsy in a group of in-patients with neuropsychiatric presentation admitted in a tertiary Brain Injury Neuropsychiatry Centre.

Methods: A cross sectional survey of healthcare records of 125 in-patients was carried out to ascertain the diagnosis of epilepsy. The current diagnosis of epilepsy and frequency of these patients' seizures as well as history of early seizures following ABI were noted.

Results: Out of 125 patients studied, 40 (32%) were diagnosed with epilepsy at some point following their brain injury or at the time of survey. Out of these, 35 patients had active epilepsy at the time of the survey with definite seizures witnessed and documented in the in-patients notes. Fifteen patients had had seizures in early phase following their ABI and no seizures reported since.

Conclusions: Patients who present with either cognitive impairment, challenging behaviour or and psychiatric illness are at a higher risk of epilepsy compared to those reported in general Brain Injury Neuro-rehabilitation setting. This could be explained by severity of ABI or the areas of brain damaged which may be involved in neuro-psychiatric presentation also causing epilepsy.